JUN 1 1 2012

Submission Date:

24 May 2012

Submitter:

Spacelabs Healthcare Ltd.

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Manufacturing Site:

Spacelabs Medical, Inc. 5150 220th Avenue SE Issaquah, WA 98029 USA

Trade Name:

Spacelabs Blease 900 Series Ventilators

Common Name:

Continuous Ventilator

Classification Name:

Continuous Ventilator

Classification Regulation:

21 CFR §868.5895

Product Code:

CBK

Substantially

New Spacelabs Model

Predicate 510(k) Number **Predicate**

Equivalent Devices:

Spacelabs Blease 900

K101850

Manufacturer / Model

Series Ventilators

Spacelabs BleaseSirius

Anesthesia Workstation

Device Description:

The Spacelabs Healthcare (Spacelabs) Blease 900 Series Ventilators (Blease 900) are advanced, microprocessor-controlled, pneumatically driven ventilators, which have been designed specifically for the mechanical ventilation of adult and pediatric patients under general anesthesia.

The unit houses the electronic and pneumatic control systems. It sets the desired ventilatory parameters and generates alarm, warning and status messages. The control unit also calculates and implements the functions necessary to drive the bellows pneumatically.

The bellows assembly consists of a base and a bellows housing.

The Spacelabs Blease 900 are designed for use with a circle-type absorber, and is ideally suited to both low- and high-flow applications.

A del Alexandre			900 Series		
Model Number		950	970	990	
Screen size		8.4	8.4	8.4	
		inches	inches	inches	
Display		Color	Color	Color	
Interface		Touch	Touch	Touch	
		and Trak	and Trak	and Trak	
Tidal volume co	mpensation				
Fresh gas compensation		Optional	Optional	Optional	
		for	for	for	
		OEM/	OEM/	OEM/	
		stand	stand	stand	
		alone	alone	alone	
Configurable p	reset or measured compliance	Yes	Yes	Yes	
Adult, and ped		Yes	Yes	Yes	
Ventilation mod				• · · · · · · · · · · · · · · · · · · ·	
Volume contro		Yes	Yes	Yes	
Pressure control		Yes	Yes	Yes	
SIMV + PSV (Volume and pressure mode		Yes	Yes	Yes	
options)			1		
Precision pressure support		No	Yes	Yes	
Ventilation mon					
Oxygen		Yes	Yes	Yes	
Inhaled and exhaled volume monitoring		Yes	Yes	Yes	
Airway pressure		Yes	Yes	Yes	
Pressure waveform		Yes	Yes	Yes	
Flow waveform		Yes	Yes	Yes	
Spirometry loops		No	No	Yes	
Data output		Yes	Yes	Yes	
Parameters	9	1.			
I:E ratio	2,0:1-1:5	YËS	YES	YES	
Frequency	2 - 99 bpm	YES	YES	YES	
Set tidal volume	20 -1500 ml	YES	YES	YES	
Minute volume	0.3 - 25 lpm	YES	YES	YES	
Pressure limit	Adult: 10 - 70 cmH ₂ 0	YES	YES	YES	
	Pediatric: 10- 50 cmH ₂ 0		<u> </u>		

Blease 900 Series Ventilators 510(k) Summary Updated

Model Number		900 Series		
		950	970	990
PEEP	3 -20 cmH ₂ 0	YES	YES	YES
Inspiratory pause	0 - 50%	YES	YES	YES
Sigh function	The delivered tidal volume is increased by 10% every 10 breaths	YES	YES	YES
Patient trigger	1 - 15 Ipm	YES	YES	YES
Pressure inspired	10- 50 cmH ₂ 0	YES	YES	YES
Max inspiratory flow	100 Ipm	YES	YES	YES
Support pressure	5 - 30 cmH ₂ 0	YES	YES	YES
User Set Alarms				
Pressure high	10 - 70 cmH ₂ 0 (equal to pressure limit in volume control or pressure inspired + 25% in pressure control)	YES	YES	YES
Pressure low	$5 - 50 \text{ cmH}_20$	YES	YES	YES
MV high	! - 25 Ipm	YES	YES	YES
MV low	0 - 24 Ipm	YES	YES	YES
High bpm	3 - 99 bpm	YES	YES	YES
Low bpm	0 - 98 bpm	YES	YES	YES
High oxygen	19 - 110%	YES	YES	YES
Low oxygen	18 - 109%	YES	YES	YES
Apnea		YES	YES	YES
Sensor error		YES	YES	YES
Vent in operative		YES	YES	YES
Inspiratory flow transducer error		YES	YES	YES
Setting error		YES	YES	YES
Реер еггог		YES	YES	YES
Under pressure		YES	YES	YES
Low supply gas pressure		YES	YES	YES
No charge		YES	YES	YES
Power fail		YES	YES	YES
Battery low		YES	YES	YES
Comms fail		YES	YES	YES
Apnea alarms in bag mode		YES	YES	YES
Sustained pressure		YES	YES	YES
Fresh gas too high	<u> </u>	YES	YES	YES

Intended Use:

The Blease 900 Series Ventilators are advanced, microprocessorcontrolled, pneumatically driven ventilators, which have been designed specifically for the mechanical ventilation of adult and pediatric patients under general anesthesia.

Technology Comparison:

The Spacelabs Blease 900 employ the same technological characteristics as the predicate device.

Characteristic	Predicate Device	Proposed Device
Mechanical Housing Configuration	Integrated into an anesthesia workstation	Stand-alone device.
Ventilation Delivery Subsystem	Pneumatic flow control valve with solenoid driven exhalation valve	Same

Ventilation Delivery Modes

Summary of Performance Testing:

Electrical Safety Testing

The Spacelabs Blease 900 was tested for performance in accordance with the following Standard:

• *IEC* 60601-1: 2005, Medical electrical equipment – Part 1: General requirements for basic safety and essential performance.

Test results indicated that the Spacelabs Blease 900 complies with the Standards.

Electromagnetic Compatibility Testing

The Spacelabs Blease 900 was tested for performance in accordance with the following Standard:

• IEC 60601-1-2: 2007, Medical electrical equipment – Part 1-2: General requirements for basic safety and essential performance – Collateral standard: Electromagnetic compatibility – Requirements and tests.

Test results indicated that the Spacelabs Blease 900 complies with the Standards.

Performance Testing

The Spacelabs Blease 900 was tested for performance in accordance with internal requirements and the following Standard:

• ASTM D4169-05, Standard practice for performance testing of shipping containers and systems.

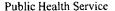
Test results indicated that the Spacelabs Blease 900 complies with its predetermined specification and with the applicable Standards.

Conclusion

Verification and validation activities were conducted to establish the performance and safety characteristics of the software device modifications made to the Spacelabs Blease 900. The results of these activities demonstrate that the Spacelabs Blease 900 is safe and effective when used in accordance with its intended use and labeling.

Therefore, the Spacelabs Blease 900 is considered substantially equivalent to the predicate device.







Food and Drug Administration 10903 New Hampshire Avenue Document Control Room –WO66-G609 Silver Spring, MD 20993-0002

Spacelabs Healthcare C/O Mr. Thomas Kroenke Principal Consultant Speed To Market, Inc. PO Box 3018 Nederland, Colorado 80466

JUN 1 1 2012

Re: K112729

Trade/Device Name: Spacelabs Blease 900 Series Ventilators

Regulation Number: 21 CFR 868.5895 Regulation Name: Continuous Ventilator

Regulatory Class: II Product Code: CBK Dated: June 1, 2012 Received: June 4, 2012

Dear Mr. Kroenke:

We have reviewed your Section 510(k) premarket notification of intent to market the device referenced above and have determined the device is substantially equivalent (for the indications for use stated in the enclosure) to legally marketed predicate devices marketed in interstate commerce prior to May 28, 1976, the enactment date of the Medical Device Amendments, or to devices that have been reclassified in accordance with the provisions of the Federal Food, Drug, and Cosmetic Act (Act) that do not require approval of a premarket approval application (PMA). You may, therefore, market the device, subject to the general controls provisions of the Act include requirements for annual registration, listing of devices, good manufacturing practice, labeling, and prohibitions against misbranding and adulteration. Please note: CDRH does not evaluate information related to contract liability warranties. We remind you, however, that device labeling must be truthful and not misleading.

If your device is classified (see above) into either class II (Special Controls) or class III (PMA), it may be subject to additional controls. Existing major regulations affecting your device can be found in the Code of Federal Regulations, Title 21, Parts 800 to 898. In addition, FDA may publish further announcements concerning your device in the Federal Register.

Please be advised that FDA's issuance of a substantial equivalence determination does not mean that FDA has made a determination that your device complies with other requirements of the Act or any Federal statutes and regulations administered by other Federal agencies. You must comply with all the Act's requirements, including, but not limited to: registration and listing (21 CFR Part 807); labeling (21 CFR Part 801); medical device reporting (reporting of medical device-related adverse events) (21-CFR-803); good-manufacturing-—practice requirements as set forth in the quality systems (QS) regulation (21 CFR Part 820); and if applicable, the electronic product radiation control provisions (Sections 531-542 of the Act); 21 CFR 1000-1050.

If you desire specific advice for your device on our labeling regulation (21 CFR Part 801), please go to http://www.fda.gov/AboutFDA/CentersOffices/CDRH/CDRHOffices/ucm115809.htm for the Center for Devices and Radiological Health's (CDRH's) Office of Compliance. Also, please note the regulation entitled, "Misbranding by reference to premarket notification" (21 CFR Part 807.97). For questions regarding the reporting of adverse events under the MDR regulation (21 CFR Part 803), please go to http://www.fda.gov/MedicalDevices/Safety/ReportaProblem/default.htm for the CDRH's Office of Surveillance and Biometrics/Division of Postmarket Surveillance.

You may obtain other general information on your responsibilities under the Act from the Division of Small Manufacturers, International and Consumer Assistance at its toll-free number (800) 638-2041 or (301) 796-7100 or at its Internet address http://www.fda.gov/MedicalDevices/ResourcesforYou/Industry/default.htm.

Sincerely yours,

Anthony D. Watson, B.S., M.S., M.B.A.

Director

Division of Anesthesiology, General Hospital, Infection Control and Dental Devices Office of Device Evaluation

Center for Devices and Radiological Health

Enclosure

Indications for Use

510(k) Number (if known):

Device Name:	Spacelabs Blease 900 Series Ventilators			
Indications for Use:	The Blease 900 Series Ventilators are advanced, microprocessor- controlled, pneumatically driven ventilators, which have been designed specifically for the mechanical ventilation of adult and pediatric patients under general anesthesia.			
Prescription Use X (Part 21 CFR 801 Subpart D)	AND/OR Over-The-Counter Use (21 CFR 807 Subpart C)			
(PLEASE DO NOT WRITE BE NEEDED)	LOW THIS LINE-CONTINUE ON ANOTHER PAGE IF			
Concurrence	of CDRH, Office of Device Evaluation (ODE)			
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(Division Sign-Off)				

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Division of Anesthesiology, General Hospital

510(k) Number: <u>K/12 729</u>

Infection Control, Dental Devices